

Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Drinking Water Program - Water Management Act
Registered & Permitted Withdrawals
Annual Report Form - Year 2007

Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Instructions

This Annual Report Form is for reporting water withdrawals required by the Water Management Act (MGL c. 21G). The Annual Report Form should be used by industrial, agricultural, golf course and any 'Other' uses that have Water Management Act Program registrations and/or permits. Cranberry growers file a separate Annual Report Form. Completion of this Annual Report Form is a requirement of Massachusetts law.

Please complete the Annual Report Form by **February 28, 2008** and return to:

**Department of Environmental Protection
Water Management Act Program
One Winter Street
Boston, MA 02108**

1. If you have water withdrawals located in more than one river basin, please complete a separate Annual Report Form for each basin.
2. Annual Reports must be submitted even if no withdrawals were made during the year.
3. For each ground or surface water withdrawal point, please fill out Section B - Individual Withdrawal Points Information.
4. Section B - Individual Withdrawal Points Information requires that recorded or metered data be entered. If metered data does not exist, give the best monthly estimate based on the method outlined in your registration statement. Document your estimate and identify the method used. Attach documentation if necessary.
5. Section C - Average Daily Demand Calculation is the summation of all the Section B Individual Withdrawal Points.
6. Section D - New Withdrawal Points has to be completed only if a new water source has been added at the site(s) during calendar year 2007.
7. Section E - Registration and Permit Conditions should be completed if conditions are required to be met on an annual basis.
8. Section F - Certification must be completed by the certifying and responsible party.
9. A Request for Transfer Application (BRP WM01) is required before a registered and/or permitted company changes ownership. A copy of the BRP WM01 application can be downloaded at <http://www.mass.gov/dep/water/approvals/wmgforms.htm>.
10. Please contact the Water Management Act Program staff at (617) 292-5706 if you have questions concerning completion of this form.

This form may be downloaded at <http://www.mass.gov/dep/water/approvals/wmgforms.htm>.

A. General Information

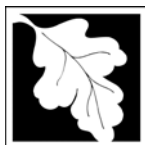
1. Facility information: (☐ Check if mailing address has changed and show new address on page 3.)

Facility Name		Address	
Town/City	Zip Code	email address	
Registration Number (if applicable)		Registered Annual Average Daily Volume (mgd)	
Permit Number (if applicable)		Permitted Annual Average Daily Volume (mgd)	
Watershed			

Note: your registration number and/or permit number appear on your mailing label.

2. Responsible Party Information (if different from above):

Name		Phone Number	
Mailing Address	Town/City	Zip Code	



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B. Individual Withdrawal Points Information

Make additional copies of this section if you have more than three withdrawal points.

Please use separate annual report forms if you are reporting on withdrawals from more than one river basin.

1. Withdrawal point	Name	Name	Name
2. Location of withdrawal point	City/Town	City/Town	City/Town
3. Metered or estimated	<input type="checkbox"/> metered <input type="checkbox"/> estimated	<input type="checkbox"/> metered <input type="checkbox"/> estimated	<input type="checkbox"/> metered <input type="checkbox"/> estimated
4. Meter type			
5. If metered, date of last calibration	Date	Date	Date
6. Please enter total meter data and/or estimates from each point and for the entire system for each month and annual totals.			

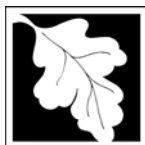
				Monthly and Yearly Totals
2007	January			
	February			
	March			
	April			
	May			
	June			
	July			
	August			
	September			
	October			
	November			
	December			
Totals		Millions of Gallons	Millions of Gallons	Millions of Gallons

7. Provide the volume of the maximum day withdrawal in million gallons per day (mgd).

Max. Day and Date	Max. Day and Date	Max. Day and Date	Max. Day and Date
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8. If unmetered, how was the estimate of gallons derived?

☐ a. Time of Operation (hours pumped times pump capacity) ☐ b. Other Method (describe):



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C. Average Daily Demand Calculation

1. Number of days of operation shown on your permit or registration: _____ days
2. Calculate the Average Daily Demand: Total 2007 gallons (from previous page) divided by number of days shown on your permit or registration.

Average Daily Demand (in mgd)

D. New Withdrawal Points

If you have added any new withdrawal points, you may need a Water Management Permit. Contact Water Management Act Program Boston staff immediately at (617) 292-5706 to discuss.

1. Name and location of new withdrawal points from which you withdrew water in 2007:

		Type (Well or Surface Water)	
_____ Name	_____ Location	<input type="checkbox"/> Well	<input type="checkbox"/> Surface
_____ Name	_____ Location	<input type="checkbox"/> Well	<input type="checkbox"/> Surface
_____ Name	_____ Location	<input type="checkbox"/> Well	<input type="checkbox"/> Surface

E. Permit and Registration Conditions

As a condition of your Water Management registration or permit, DEP may require that you provide certain information on an annual basis (for example, wetlands or groundwater level monitoring reports). Please review your permit or registration to determine if any reporting requirements apply.

Type of Condition	Was a report provided to DEP Regional Office?	Approximate Date Report submitted to DEP Regional Office
a. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ date
b. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ date
c. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ date

F. Certification

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate and complete."

Print Name of Certifying Person

Signature of Certifying Person

Title

Date

If different from front, provide new mailing address

State

Zip Code

Phone Number